

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-------------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | <i>MS</i> | 45 | 11/1 |
| FORMALITY REVIEW | <i>S.B.</i> | 20/895 | 12-11-00 |
| RESPONSE FORMALITY REVIEW | <i>JK</i> | 835 | 04/19/01 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
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| Final | |
| Original | |
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| Claim | Date |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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